PATENT APPLICATION FEE DETERMINATION RECORD

Effective January 1, 2003

Application or Docket Number

10611830

CLAIMS AS FILED - PART I (Column 1)					(Column 2)		SMALL ENTITY TYPE		OR	OTHER THAN OR SMALL ENTITY	
TOTAL CLAIMS			lif				RATE	FEE		RATE	FEE
FOR			NUMBER FILED		NUMB	ER EXTRA	BASIC FEE	375.00	OR	BASIC FEE	750.00
TOTAL CHARGEABLE CLAIMS			/ 4 minus 20=		*		X\$ 9=		OR	X\$18=	
INDEPENDENT CLAIMS			/ minus 3 =		* ~		X42≈	_ · · · · · · · · · · · · · · · · · · ·	OR	X84=	
MULTIPLE DEPENDENT CLAIM PRESENT				-			+140=		OR	+280=	
* If the difference in column 1 is less than zero, ente					"0" in c	olumn 2	TOTAL		OR	TOTAL	2(2)
CLAIMS AS AMENDED - PART										OTHER	
		(Column 1)		(Column 2) (Column 3)			SMALL	ENTITY	OR	SMALL	ENTITY
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUMI PREVIO PAID	BER DUSLY	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	X\$ 9=		OR	X\$18=	
	Independent	*	Minus	Minus *** LTIPLE DEPENDENT		=	X42=		OR	X84=	
Ĺ	- ringi Phese	INTATION OF MIC	DETIPLE DEF	CINDEIN	CLAIIVI		+140=		OR	+280=	
									OR	TOTAL ADDIT, FEE	
		(Column 1)		(Colur	mn 2)	(Column 3)	ADDIT. FEE			AUDII. FEE	
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	IEST BER DUSLY	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***	- OL A114	=	X42=		OR	X84=	
L	LINOI PHESE	NTATION OF MU	JUITPLE DEF	ENDEN	CLAIIVI		+140=		OR	+280=	
									OR	TOTAL ADDIT, FEE	
		(Column 1)		(Colur	mn 2)	(Column 3)	ADDIT. FEE			AUDIT, FEET	
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	IEST BER DUSLY	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	X\$ 9≈		OR	X\$18=	
	Independent	* NTATION OF MI	Minus	***	CL AINA	=	X42=		OR	X84=	
<u> </u>	I INST PRESE	INTALION OF MI	JETTE DE	ENDEN	CLAIM		+140≈		OR	+280=	
	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."								ΛÞ	TOTAL	
***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.											